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MARTIN & FERRARO, LLP

ATTORNEYS AT LAW

17383 SUNSET BLVD, SUITE 315 LOS ANGELES, CALIFORNIA 90272

Telephone (310) 286-9800

Facsimile (310) 286-2795

FACSIMILE TRANSMITTAL

TO:

FROM:

Name: Mail Stop AF

Name: Amedeo F. Ferraro, Esq.

Group Art Unit 3738 Examiner Paul B. Prebilic

Firm: U.S. Patent & Trademark Office

Phone No.: 310-286-9800

Fax No.: 571-273-8300

No. of Pages (including this): 41

Subject: U.S. Patent Application No. 09/593,591

Date: February 19, 2008

Gary K. Michelson

Filed: June 13, 2000 MANUFACTURED MAJOR LONG BONE RING

IMPLANT SHAPED TO CONFORM TO A PREPARED INVERTEBRAL IMPLANTATION

SPACE

Attorney Docket No. 101.0078-00000

Customer No. 22882 Confirmation No.: 5619 Confirmation Copy to Follow: NO

Message:

CERTIFICATE OF TRANSMISSION UNDER 37 CFR 1.8

I hereby certify that the attached Transmittal Form (in duplicate) and Amendment After Final are being facsimile transmitted to the U.S. Patent and Trademark Office on February 19, 2008.

Sandra L. Blackmon

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FORM PTO-1083

Attorney Docket No.: 101.0078-0000

Customer No. 22882

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In reapplication of: Gary K. Michelson Serial No: 09/593,591

June 13, 2000

Filed: For

MANUFACTURED MAJOR LONG BONE

RING IMPLANT SHAPED TO CONFORM

TO A PREPARED INVERTEBRAL

IMPLANTATION SPACE

Confirmation No.: 5619

Art Unit:

3738

Paul B. Preblic Examiner:

Mail Stop AF Commissioner for Patents

P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an Amendment After Final in reply to the Final Office Action dated December 17, 2007 in the above-identified application.

No additional fee is required.

Applicant hereby requests a ***-month extension of time to respond to the above office action.

The fee has been calculated as shown below:

	(Col 1) Claims remaining After Amendment		(Col. 2) HIGHEST NUMB PREVIOUSLY PAID		(Col. 3) PRESENT EXTRA*	LG/SI \$ ENTITY			DUE
TOTAL CLAIMS FEE	244	1.	284	. **	0	LG=\$50 SM=\$25	\$50	\$	0
INDEPENDENT CLAIMS FEE	9	1.	8	943	0	LG≔\$200 SM=\$100	\$200	\$	0
	OF MULTIPLE DEPENDENT	CLAB	AS .		LARI SMA	SE ENTITY FE	E=\$380 E=\$180	89	0
							TOTAL	\$. 0

If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amandment or the number of claims originally filed.

The total amount of \$***.00 to cover the *** -month extension fee is to be charged to Deposit Account No.

The Commissioner is hereby authorized to charge any deficiencies of fees associated with this 図 communication or credit any overpayment to Deposit Account No. 50-3726. A copy of this sheet is enclosed.

Any filling fees under 37 C.F.R. § 1.16 for the presentation of extra claims

Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,

MARTIN & FERRARO, LLP

Date: February 19, 2008

1557 Lake O'Pines Street, NE

Hartville, Ohio 44632 Telephone: (310) 286-9800 Facsimile: (310) 286-2795

Registration No. 37.129

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FORM PTO-1083

FEB 1 9 2008

Attorney Docket No.: 101.0078-0000

Customer No. 22882

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

3308772030

In re application of: Gary K. Michelson Serial No: 09/593,591

Filed: June 13, 2000

For: MANUFACTURED MAJOR LONG BONE

RING IMPLANT SHAPED TO CONFORM TO A PREPARED INVERTEBRAL

IMPLANTATION SPACE

Confirmation No.: 5619

Art Unit:

3738

Examiner:

Paul B. Prebilic

Mail Stop AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

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TOTAL CLAIMS FEE	244	-	284	•	0	LG≔\$50 SM≔\$25	\$50	\$ ٥
INDEPENDENT CLAIMS FEE	9	-	8	***	0	LG=\$200 SM=\$100	\$200	\$ 0
FIRST PRESENTATION	OF MULTIPLE DEPENDENT	CLAI	18			GE ENTITY FEI		\$ 0
						-	TOTAL	\$ 0

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

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The total amount of \$***.00 to cover the *** -month extension fee is to be charged to Deposit Account No. 50-3726

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Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,

MARTIN & FERRARO, LLP

Date: February 19, 2008

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Hartville, Ohio 44632

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Registration No. 37,129

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FEB 1 9 2008

RESPONSE UNDER 37 C.F.R. 1.116 EXPEDITED PROCEDURE EXAMINING GROUP 3774

PATENT Attorney Docket No. 101.0078-00000 Customer No. 22882

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:) Confirmation No.: 5619
Gary K. Michelson	· ·
Serial No.: 09/593,591) Group Art Unit: 3738
Filed: June 13, 2000) Examiner: Paul B. Prebilic
For: MANUFACTURED MAJOR LONG) ·
BONE RING IMPLANT SHAPED)
TO CONFORM TO A PREPARED)
INTERVERTEBRAL	·
IMPLANTATION SPACE	j

Mail Stop AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

AMENDMENT AFTER FINAL

In reply to the Final Office Action of December 17, 2007, and pursuant to 37 C.F.R. § 1.116, Applicant proposes that this application be amended as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks begin on page 35 of this paper.